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APPLICANTS
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**** CONTINUING DATA *******
 This application is a 371 of PCT/EP03/07859 07/18/2003

**** FOREIGN APPLICATIONS *******
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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed 35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWINGS 4	TOTAL CLAIMS 57 13	INDEPENDENT CLAIMS 6 7
Verified and Acknowledged	/VICTORIA P CAMPBELL/ Examiner's Signature	Initials				

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TITLE
 Drug delivery system

FILING FEE RECEIVED 4360	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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